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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	ATTORNEY DOCKET NO. CONFIRMATION NO.	
10/089,020	03/27/2003	Amarjit Singh	U 013943-5	9010	
LADAS & P	7590 04/22/200 CRRYIIP	8	EXAM	EXAMINER	
26 WEST 615	ST STREET		PRYOR, ALTON NATHANIEL		
NEW YORK,	NY 10023		ART UNIT	PAPER NUMBER	
			1616		
			MAIL DATE	DELIVERY MODE	
			04/22/2008	PAPER	

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Application No. Applicant(s)

Interview Summary	10/089,020	SINGH ET AL.	
merview Summary	Examiner	Art Unit	
	ALTON N. PRYOR	1616	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>ALTON N. PRYOR</u> .	(3)		
(2) Attorney J. Cord.	(4)		
Date of Interview: 16 April 2008.			
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	2) applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: on record.			
Identification of prior art discussed: <u>N/A</u> .			
Agreement with respect to the claims f)☐ was reached. g	i)☐ was not reached. h)⊠ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Discussed proposed clair mailed 1/31/08</u> .			
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTFILE A STATEMENT OF THE SUBSTANCE OF THE INTE requirements on reverse side or on attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM,	been filed, APP ' DAYS FROM T WHICHEVER IS	LICANT IS 'HIS LATER, TO
	/Alton N. Pryor/		
	Primary Examiner, Art Unit 16		
Examiner Note: You must sign this form unless it is an	Examiner's signature, if requi	red	

Attachment to a signed Office action.

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